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Application Number 10/537,192

10/537,192

TRANSMITTAL	Filing Date	October 12, 2005
FORM	First Named Inventor	Amaya
	Art Unit	1616
(to be used for all correspondence after initial	Examiner Name	Schlientz, Nathan W
	Attorney Docket Number	38184.04113US
Total Number of Pages in This Submission		
ENCLOSURES (Check all that apply)		
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks	ddress Status Letter Other Enclosure(s) (please Identify below): 1. Credit Card Authorization
Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNA Firm Name Milbank, Twend, Hadley Signature Printed name Einar Stole, Ph.D. Date C	EERTIFICATE OF TRANSMISSI	Reg. No. 47,272
A Toursel or a sixted and a		Date

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s are required to respond to a collection of information unless it displays a valid OMB control number Under the Paperwork Reductio Effective on 12/08/2004 Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/537,192 **Application Number** FEE TRANSMITTAL Filing Date October 12, 2005 For FY 2008 First Named Inventor Amaya **Examiner Name** Schlientz, Nathan W Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1616 TOTAL AMOUNT OF PAYMENT 1250.00 Attorney Docket No. 38184.04113US METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Other (please identify): ✓ Deposit Account Deposit Account Number: 13-3250 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 510 210 155 255 105 Design 210 105 100 50 130 65 Plant 210 105 310 160 155 80 620 Reissue 310 510 155 255 310 Provisional 210 105 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee Description Fee (\$) 50 Each claim over 20 (including Reissues) 25 210 Each independent claim over 3 (including Reissues) 105 370 185 Multiple dependent claims **Total Claims** Extra Claims **Multiple Dependent Claims** Fee (\$) Fee Paid (\$) - 20 or HP = 4 50 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = 0 0 0.00 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Total Sheets Extra Sheets Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Petition for 3 month extension of time 1050.00 SUBMITTED BY Registration No. 47,272 Signature (Attorney/Agent) Name (Print/Type) Einar Stole, Ph.D

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